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**Complete If Known**

Application Number	10/517,132
Filing Date	12/06/2004 01/06/2008
First Named Inventor	Shaily Verma et al.
Art Unit	2616
Examiner Name	Roberta A. Shand
Attorney Docket Number	PU020265

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01/06/2008

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Substitute for form 1449B/PTO		<b>Complete If Known</b>	
<b>INFORMATION DISCLOSURE STATEMENT BY APPLICANT</b>		Application Number	10/517,132
		Filing Date	12/06/2004
		First Named Inventor	Shaily Verma et al.
		Art Unit	2616
		Examiner Name	Roberta A. Shand
		Attorney Docket Number	PU020265
Sheet	2	of	2

NON PATENT LITERATURE DOCUMENTS			
Examiner Initials *	Cite No. <sup>1</sup>	Include name of the author (in CAPITAL LETTERS), title of the article (when appropriate), title of the item (book, magazine, journal, serial, symposium, catalog, etc.), date, page(s), volume-issue number(s), publisher, city and/or country where published.	T <sup>2</sup>
/RS/		COPY OF SEARCH REPORT DATED SEPTEMBER 5, 2003	

Examiner Signature	/Roberta Shand/	Date Considered	01/06/2008
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